PATENT APPLICATION EE DETERMINATION RECORDINATION RECORDIN

Application or Docket Number

10/523853

CLAIMS AS FILED - PART I												
-		CLAIMS A	(Column 1		(Column 2)			SMALL ENT	71TY	OR	OTHER SMALL E	
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
BAS	IC FEE	- -	SMALL ENT. =	\$ 150	LARGE ENT. = \$ 300			BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Artic (4) = \$50/\$	100	All other situations = \$ 100 / \$ 200			EXAM. FEE			EXAM. FEE	200
SEA	RCH FEE		U.S. is ISA = \$50 ALL other count \$ 200 / \$ 40	nies =		ner situations = 250 / \$ 500		SEARCH FEE			SEARCH FEE	iw
FEE FOR EXTRA SPEC. PGS.			minus	100 =	/ 50 =			X \$ 125 =			X \$ 250 =	·
TOTAL CHARGEABLE CLAIMS			<i>ig</i> minu	s 20 = .	. —			X \$ 25 =		OR	X \$ 50 =	
INDE	PENDENT CL	AIMS	<i>j</i> min	us 3 = .	. –			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEND	DENT CLAIM PRE	SENT	•	· ·			+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	900	
2. 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 18	Minus	$\dot{\alpha}$	O			X \$ 25 =		OR	X \$ 50 = _	
	Independent	• /	Minus •	ئے				X \$ 100 =		OR	X \$ 200 = -	,
ř	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
		-						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	ın 2\	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	in t		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	•	Minus	**		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	ULTIPLE DEPEN	IDENT C	LAIM			+ \$ 180 =		OR	+ \$ 360 =	
TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)

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